



... Constitution and By-Laws . .

AND

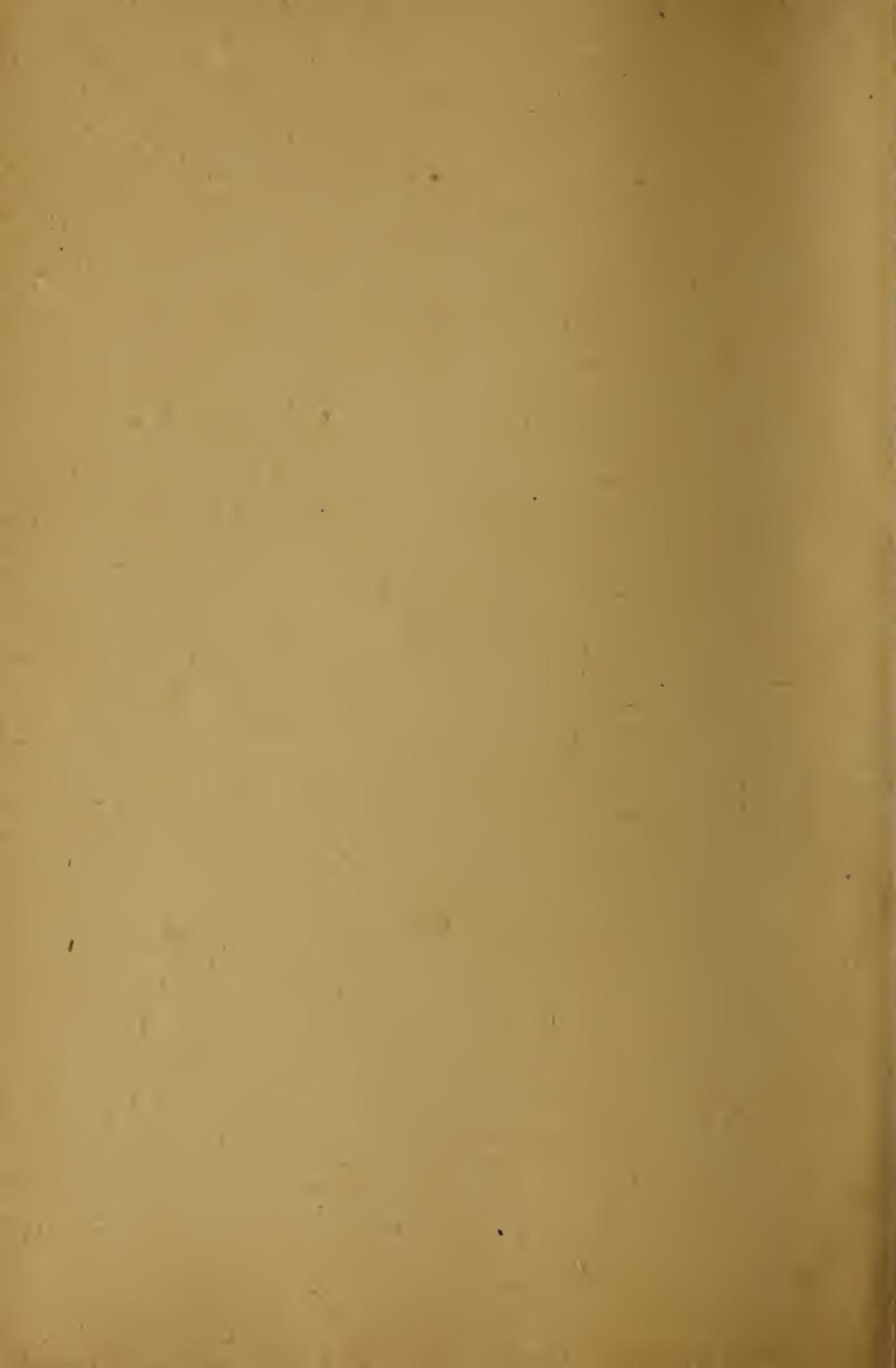
CODE OF ETHICS

OF THE

* ONTARIO * MEDICAL * ASSOCIATION *

REVISED AND AMENDED JUNE, 1889





Constitution and By-Laws

—AND—

CODE OF ETHICS

OF THE

Ontario Medical Association

—

ORGANIZED AT TORONTO, JUNE 30TH, 1881

—

INITIATORY COMMITTEE.

Dr. C. W. Covernton, Dr. J. Workman, Dr. J. E. Graham, Dr. J. H. Burns,
Dr. A. H. Wright, Dr. J. E. White.

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TORONTO:

BROUGH & CASWELL, 14 BAY STREET

ONTARIO MEDICAL ASSOCIATION.

OFFICERS FOR 1890.

PRESIDENT.

DR. J. ALGERNON TEMPLE, Toronto.

VICE-PRESIDENTS.

DR. J. B. LUNDY, Preston.

DR. G. SHAW, Hamilton.

DR. K. N. FENWICK, Kingston.

DR. J. HANLY, Waubaushene.

TREASURER.

DR. E. J. BARRICK, Toronto.

GENERAL SECRETARY.

DR. D. J. GIBB WISHART, Toronto.

ASSISTANT SECRETARY.

DR. W. P. CAVEN, Toronto.

PAST OFFICERS.

PRESIDENTS.

1881.	Dr. J. Workman, Toronto.
1882.	" C. W. Covernton, Toronto.
1883.	" J. D. Macdonald, Hamilton.
1884.	" D. Clark, Toronto.
1885.	" A. Worthington, Clinton.
1886.	" G. A. Tye, Chatham.
1887.	" J. H. Richardson, Toronto.
1888.	" J. W. Rosebrugh, Hamilton.
1889.	" W. H. Henderson, Kingston.

VICE-PRESIDENTS.

1881—Dr. Irwin, Kingston ;	Dr. Tye, Chatham ;	Dr. Macdonald, Hamilton ;	Dr. McMillan, Alexandria.
1882—Dr. Mullin, Hamilton ;	Dr. Yeomans, Mt. Forest ;	Dr. Hamilton, Port Hope ;	Dr. Irwin, Wolfe Island.
1883—Dr. Stewart, Brucefield ;	Dr. D. Clark, Toronto ;	Dr. Dupuis, Kingston ;	Dr. Harrison, Selkirk.
1884—Dr. Worthington, Clinton ;	Dr. Philip, Brantford ;	Dr. Richardson, Toronto ;	Dr. McGill, Oshawa.
1885—Dr. Tye, Chatham ;	Dr. Thorburn, Toronto ;	Dr. Brouse, Brockville ;	Dr. Powell, Toronto.

PAST OFFICERS—*Continued.*

1886—Dr. Arnott, London ; Dr. Temple, Toronto ; Dr. Hilliary, Aurora ; Dr. Henderson, Kingston.
1887—Dr. Harrison, Selkirk ; Dr. Brouse, Brockville ; Dr. Moorhouse, London ; Dr. Aylesworth, Collingwood.
1888—Dr. H. M. Mackay, Woodstock ; Dr. V. H. Moore, Brockville ; Dr. A. H. Wright, Toronto ; Dr. A. Taylor, Goderich.
1889—Dr. W. B. Geikie, Toronto ; Dr. Howitt, Guelph ; Dr. Day, Trenton ; Dr. Aikman, Collingwood.

GENERAL SECRETARIES.

Dr. J. E. White, Toronto, 1881 to 1888. Dr. D. J. Gibb Wishart, Toronto, 1889.

CORRESPONDING SECRETARIES.

1881—Drs. Stewart, Brucefield ; Wolverton, Hamilton ; Hamilton, Port Hope ; Macdonald, Alexandria.
1882—Drs. Day, Trenton ; Stewart, Brucefield ; Wolverton, Hamilton ; Macdonald, Alexandria.
1883—Drs. Graham, Brussels ; Burt, Paris ; McIntosh, Vankleek Hill ; Coburn, Oshawa.
1884—Drs. Graham, Brussels ; McKay, Woodstock ; Cameron, Toronto ; Aylesworth, Collingwood.
1885—Drs. Irwin, Kingston ; Harris, Brantford ; Waters, Cobourg ; Hutchinson, Brussels.
1886—Drs. A. H. Wright, Toronto ; Campbell, Seaforth ; Aylesworth, Collingwood ; Mitchell, Enniskillen.
1887—Drs. Fraser, Sarnia ; Harris, Brantford ; Aikman, Collingwood ; Gibson, Belleville.
1888—Drs. Fenwick, Kingston ; Dr. McPhattie, Guelph ; Dr. Powell, Ottawa ; Dr. Shaw, Hamilton.
1889—Drs. Lovett, Ayr ; Trimble, Queenston ; Gillies, Teeswater ; Leonard, Napanee.
1890—Office abolished.

TREASURERS.

Dr. J. E. Graham, Toronto, 1881 to 1886. Dr. N. A. Powell, Toronto, 1887 to 1889.

ONTARIO MEDICAL ASSOCIATION.

LIST OF MEMBERS.

HONORARY MEMBERS.

* J. B. Hunter, M.D., New York.
Wm. Osler, M.D., F.R.C.P., Lond., Johns Hopkins' University.

MEMBERS BY INVITATION.

1882—Drs. Fenwick, Osler, Alexander, of Montreal. Dr. Avery, Michigan State Board of Health.
1884—Dr. L. Howe, delegate N. Y. S. M. Society.
1885—Dr. E. W. Jenks, Detroit; Dr. Brodie, Pres. American Medical Association; Rev. Canon Newman.
1886—Drs. Ross, Rogers, Trenholme, of Montreal. Dr. Manton, Detroit; Dr. W. S. Tremaine, Buffalo; Drs. Cronyn and Lucien Howe, Buffalo; E. M. Moore, Rochester.
1887—Drs. G. W. Fox, Satterthwait, Porter, Gerster, of New York; Drs. Cronyn and Hubbard, Buffalo; Drs. Manton and Duffield, Detroit; Drs. Cameron and Stewart, Montreal.
1888—Drs. A. W. Johnstone, Danville; J. A. Wyeth, New York; Wm. Gardner, Montreal; C. C. Rice, New York.
1889—Drs. J. Stewart, Montreal; W. S. Tremaine, Buffalo; T. A. Foster, Portland; L. A. Weigel, Rochester; L. Howe, Buffalo; F. Buller, Montreal; Skene, Brooklyn; Vanderveer, Albany; Letcher, Henderson, Ky.; R. Newman, New York; R. Park, Buffalo; Mann, Buffalo.

ORDINARY MEMBERS.

Acheson, G., Toronto
Addison, J. L., St. George
Aiken, Ed., Weston
Aikins, W. H. B., Toronto
Aikins, W. T., “
Aikins, H. W., “
Aikman, B., Collingwood
Allison, W., Bowmanville
Allan, J., Harriston
Alexander, R. A., Grimsby
Anderson, W. G., Winches-
ter Springs
Ames, F. H. S., Brigden
Anglin, W. G., Kingston
Anderson, J. E., Millgrove
Anderson, H. L., Niagara
Appelbe, J., Parry Sound
Armstrong, G. S., Flesherton
Armstrong, W., Toronto
Armstrong, T., Toronto
Arnott, H., London
Atherton, A. B., Toronto

Avison, O. R. Toronto
Aylesworth, G. M., Colling-
wood
Aylesworth, R. B., Parkdale
Baines, A. M., Toronto
Baird, J. G., Pakenham
Ball, J., Toronto
Baldwin, J. B., Toronto
Barclay, G. A., Parkhill
Barrick, E. J., Toronto
Bascom, J., Uxbridge
*Battersby, C., Port Dover
Baugh, J., Waterdown
Beaton, A. H., Orillia
Beeman, M. J., Centerville
Beeman, T. W., “
Belt, R. W., Oshawa
Beemer, N. H., London
Bell, J. C., Merlin
Belton, C. W., London
Belfry, O. M., “
Bently, L., Toronto

Bertram, T. A., Dundas
Bethune, A., Toronto
Bethune, N., “
Bice, M., Arva
Bingham, G. A., Toronto
Biggar, G. W., Hamilton
Black, W. S., Uxbridge
Blackstock, W. H., Thorold
Bigelow, A. W., Chicago
Bowlby, D. S., Berlin
Bonnar, D., Bolton
Bogart, I. D., Campbellford
Bogart, D. P., Whitby
Booth, D. B., Odessa
Boyle, A. R., Lisle
Bray, J. L., Chatham
Bridgland, S., Bracebridge
Brock, L., Guelph
Bray, J., Toronto
Brown, J. P., Toronto
Brown, J. J., Owen Sound
Bromley, E., Beeton

* Deceased.

ORDINARY MEMBERS—*Continued.*

Brent, H., Toronto	Davison, M., Florence	Going, H., London
Britton, W., “	Davey, P. N., Duart	Gordon, G., Toronto
Bryce, P. H., “	Day, H. W., Trenton	Gould, D. H., Mt. Albert
*Brouse, J. E. Brockville	Day, W. D., Harrowsmith	Graham, J. E., Toronto
Buchan, H. E., Toronto	Dafoe, W. A., Madoc	Graham, W., Brussels
Bucke, R. M., London	Dales, J. R., Dunbarton	Grant, D. J., Gravenhurst
Burgess, T. J. W., Hamilton	Dickson, C. R., Toronto	Grant, A., Beaverton
Burnham, G. H., Toronto	Digby, J. W., Brantford	Grant, J. Sir, Ottawa
Burns, J. H., “	Dobie, D. A., Toronto	Grafton, C. S., Toronto
Burns, R. A. E., “	Delow, A., Alvinston	Greer, T. N., Cold Springs
Burritt, H. C., “	*Douglass, R., Port Elgin	Groves, A. Fergus
Burt, J. C., “	Downey, W. S., St. Cathar'ns	Grassett, F. L., Toronto
Burt, W., Paris	Dorland, S. M., Rodney	Griffin, E., Brantford
Burgess, J. A., Toronto	Doolittle, P. E., Toronto	Griffin, H. S., Hamilton
Burrows, P. P., Lindsay	Drummond, H. E., Pontypool	Greig, W. J., Toronto
Caldwell, W. Lakefield	Dunlop, Neil, Sydenham	Gunn, J., Durham
Campbell, J., Seaforth	Duncau, J. T., Toronto	Gunn, W., Clinton
Campbell, J. F., Toronto	Duncan, J. H., Chatham	Gullen, J. B., Toronto
Caniff, W., Toronto	Dupuis, T. R. Kingston	Hanly, J., Waubaushene
Cameron, I. H., Toronto	Drake, W. H. Kingsville	Hagel, S. D., Toronto
Caw, W., Parkhill	Drake, F. P., London	Hamilton, A., “
Carney, R., Windsor	Eakins, J. E. Belleville	Hamilton, H. J., Woodhill
Carlton, W. H., W. Tor. Jct.	Eccles, F. R., London	Hall, R., Meaford
Carmichael, D. N., Peterboro	Ecroyd, A. E., Mt. Forest	Harris, W. T., Brantford
Carson, A. T., Toronto	Edwards, E. G., London	Harrison, T. S., Selkirk
Carroll, J., Norwich	Ellis, W. H., Toronto	Harvey, L., Watford
Carveth, G. H., Toronto	Evans, J., Elmwood	Hart, J. W., Huntsville
Cassidy, J. J., “	Ellis, A. D., Toronto	Harvey, J., Orangeville
Cascaden, J., Iona	Elliott, H. R., Brucefield	Hastings, C. J. C. O., Toronto
Caven, J., Toronto	Elliott, J. E., Toronto	Harrison, W. T., Keene
Caven, W. P., “	English, W. M., London	Harkness, J., Dix'n, Corn'r.
Chamberlan, A. H., Kelvin	Fairchild, R. M., Hamilton	Henderson, W. H., Kingston
Charlton, W. J., Weston	Farewell, A., Glanford	Henderson, W., Arthur
Christoe, W. S., Flesherton	Ferguson, J., Toronto	Henwood, R., Brantford
Clark, D., Toronto	Fenwick, K. N., Kingston	Herod, G. S., Guelph
Clark, P. H., Woodville	Field, B., Toronto	Hilliary, R. W., Aurora
Clark, J., Oshawa	Fife, J. A., Peterborough	Hilliary, J. A., Jamaica
Clarke, C. K., Kingston	Fisher, A. J., Wiarton	Hillyer, E. S., Hamilton
Clarke, W., Palmerston	Fisher, J. H., Toronto	Hixon, E. F., Priceville
Cleland, G. S., Toronto	Forbes, G., Beachbury	Hoar, W. W., Strathroy
Clemesha, J. W., Port Hope	Fowler, F., Kingston	Hodge, G., Mitchell
Clerks, H. S., Lucan	Fraser, A. S., Sarnia	Hodgetts, C. A., Toronto
Clossen, L. D., Toronto	Frazer, J., Toronto	Hoig, D. S., Oshawa
Coatsworth, R. C., “	Freel, S. L., Stouffville	Holmes, G. T., Brussel
Coburn, W., Oshawa	Freel, J. A., “	Holmes, T. K., Chatham
Cochrane, E. C., Omemee	Freeman, W. F., Walkerton	Hopkins, W. B., Marshville
Collver, J. G., Waterford	Forest, R. W., Mt. Albert	Hoyt, D., Ingersoll
Cotton, J. H., Toronto	Foxton, E., Toronto	Howell, J. H., Shedden
Cotton, J. M., Lambton Mills	Foulton, J., “	Howitt, H., Guelph
Courtenay, J. D., Waterdown	Gardnier, J. H., London	Hunt, R. H., Clarksburg
Corliss, J., St. Thomas	Garratt, A. H., Toronto	Hunt, H., Toronto
Couse, G., London	Gaviller, A. C., Gr'd Valley	Hunter, J., “
Covernton, C. W., Toronto	Geikie, A. J., Toronto	Hunter, J. J., Lemonville
Covernton, T. S., Toronto	Geikie, W. B., “	Hurlburt, R. W., Brucefield
Cunningham, H. C., “	Ghent, B. E., “	Hutchinson, J. A., Brussels
Cuthbertson, C. R., “	Gillespie, W. R., W. Tor. Jct.	Inksetter, D. G., Dundas
Curry, C. D., Minden	Gillespie, A. Manilla	Irving, W., Kirkton
Cruikshank, G. R., Ellesmere	Gillies, J., Teeswater	Irwin, C. A., Kingston
Curry, R. C., Toronto	Gilpin, W., Brechin	Island, R., Rosemont
Davidson, A., “	Gibson, W. J., Belleville	Jackson, J. M., London
Davison, J. L., “	Gilmour, J. F., W. Tor. Jct.	James, W., Burgessville

* Deceased.

ORDINARY MEMBERS—*Continued.*

Jeffers, W. C., Oakwood	Miller, T., Hamilton	McTavish, A., Staffa
Jeffs, W. H., Havelock	Millman, T., Toronto	McCandless, F., Ilderton
Jenner, J. E., Picton	Mitchell, W. J., London	Nation, J., Uxbridge
Johnson, A. J., Toronto	Mitchell, J. C., Enniskillen	Nelles, J. A., London
Johnston, F. H., Burford	*Moore, C. G., London	Nesbitt, W. B., Toronto
Jones, R., Port Perry	Moore, C. S., London	Nevitt, R. B., Toronto
Jones, A. C., Cumminsville	Moore, V. H., Brockville	Newman, J. B., Wallaceburg
Jones, J. A., Kemptville	Moore, C. F., Toronto	Oakley, W. D., Plattsburgh
Kains, R., St. Thomas	More, L. M., Tamworth	Oakley, F., Toronto
Keating, T. A., Guelph	Moorhouse, W. H., London	Odlum, J., Woodstock
Kennedy, J. E., Chicago	Moorhouse, H. H., Toronto	O'Gorman, C., Hastings
Kerr, B. S., West Tor. Jct.	Morton, W., Wellesley	Oliver, J. B., Cartwright
Kitchen, E. E., St. George	Mullin, J. A., Hamilton	Oliver, J. W., Clifton
Kitson, E. G., Hamilton	Mulloy, N., Preston	Oldright, W., Toronto
Knill, E. G., Markham	Munroe, J. T., Dominionville	Olmstead, I., Hamilton
Knight, J., Tamworth	Murphy, J. B., Belleville	Ogden, U., Toronto
King, E. E., Toronto	Musgrave, J., Toronto	Orr, O. J., “
King, J. S., “	Murray, S. S., Thorndale	O'Reilly, C., “
King, F., Port Colborne	McAlpine, J., Lindsay	O'Reilly, G., Fergus
Lachner, H. G., Berlin	McArthur, J. A., London	Osborne, J. W., Beaton
Lapsley, W., Woburn	McBride, J., Heathcote	Ovens, T., Arkona
Leonard, R. A., Napanee	McCamus, W., Bobcaygeon	Palmer, L. L., Toronto
Lehman, W., Toronto	McCargow, W., Hamilton	Parsons, J. H., Meaford
Lennox, L. J., “	McCallum, G. A., Dunville	*Patterson, J. W., Toronto
Lepper, W. J., Acton	McConnell, J. D., Toronto	Patullo, A., Toronto
Lett, S., Guelph	McCrea, J. N., Campbellfield	Payne, S., London
Leslie, J., Hamilton	McCrimmon, D. A., Lucknow	Peaker, J. W., Toronto
Lewis, F. W., Waldemar	McCrimmon, J., Kincardine	Peters, G. A., Toronto
Lindsay, J., Guelph	McCrimmon, M., Palermo	Philip, W., Hamilton
Lindsay, W. B., Strathroy	McCullough, J., Toronto	Phillip, D. L., Brantford
Logie, W. J., London South	McCullough, J. H., Owen Sound	Playter, E., Ottawa
Lockhart, R. J., Hespeler	McDermid, W., Dunvegan	Pollard, S. B., Toronto
Loughead, G. D., Petrolia	McDonagh, G. R., Toronto	Pope, F. H., Bothwell
Lovett, W., Ayr	McDonell, A. R., Orillia	Porter, R., Walkerton
Lowry, W. H., Acton	McGarry, J., Niagara Falls	Potts, G. J., Parry Sound
Lundy, J. B., Preston	*McGregor, D., Chatsworth	Powell, N. A., Toronto
Machell, H. T., Toronto	*McGill, W., Oshawa	Powell, R. W., Ottawa
Machell, A. G., Owen Sound	McGuire, E. W., Guelph	Primrose, A., Toronto
Mackelcan, G. L., Hamilton	McIntosh, J., Vankleek Hill	Pringle, G., Cornwall
Mackay, H. M., Woodstock	McKay, A., Ingersoll	Prouse, E., Essex Centre
Macallum, A. B., Toronto	McKay, W., St. Mary's	Pyne, R. A., Toronto
Macalpine, R. S., Parkhill	McKechnie, N., Thorndale	*Pyne, T., “
Macdonald, A. A., Toronto	McKenzie, B. E., Toronto	Pyne, A. R., “
Macdonald, J. D., Hamilton	McKenzie, A. F., Toronto	Radford, J. H., Galt
MacCallum, H. A., London	McKelvey, A., Brussels	Rankin, J. P., Tavistock
Macfarlane, L., Toronto	McKeough, G. T., Chatham	Rea, J., Toronto
Mackid, H. G., Seaforth	McKinnon, A. H., Hillsburg	Reid, J. N., Thornhill
Madill, J., Alliston	McKinnon, A., Guelph	Reeve, R. A., Toronto
Mallock, A. E., Hamilton	McLaren, A. L., P't Edward	Reeve, J. L., Clinton
Marlatt, C. W., Aylmer	McLay, P. W., Aylmer	Reynolds, J. W., Hamilton
Marguis, D., Brantford	McLean, T. F., Goderich	Reynolds, H. E., Toronto
Martyn, D. H., Kincardine	McLean, A., Sarnia	Rice, A. T., Woodstock
Martin, C. E., Toronto	McLean, W. F., London	Ridley, H. T., Hamilton
Martin, H. S., Erin	McLean, J., Orillia	*Riddel, A. A., Toronto
Mather, W. M., Tweed	McMahon, J., Dundas	Riddell, A. B., Bayham
Mearns, J., Petrolia	McMartin, D. R., Chicago	Richardson, J. H., Toronto
Meek, H., London	McMillan, D., Alexandria	Richardson, W. A., Donald, B.C.
Meikle, T. D., Mt. Forest	McNaughton, H., Erin	Riordan, B. L., Toronto
Meldrum, N. W., Ayr	McPhatter, N. L., Cleveland	Robinson, W. O., St. Jacobs
Metcalfe, W. G., Kingston	McPhedran, A., Toronto	Robinson, W., Markham
Miller, L. F., Toronto	McTaggart, A., Parkhill	

* Deceased.

ORDINARY MEMBERS—*Continued.*

Robinson, J., London	Smith, W. H., Toronto	Tucker, M. M., Orono
Robinson, C., Claude	Smith, W. L., Glandford	Turver, W. W., Parkdale
Robinson, A., Unionville	Smith, J., Galt	Tweedale, J. B., St. Thomas
Robson, W. T., Vanneck	Smith, J. D., Tilsonburg	Tye, G. A., Chatham
Roe, W. J., Georgetown	Sonnett, T. R., St. John	Vandeburg, J. F., Merriton
Roome, W. F., Newbury	Spence, J., Toronto	Vardon, T. W., Galt
Rose, D. A., Toronto	Spencer, B., Toronto	Wagner, W. J., Toronto
Rosebrugh, A. M., Toronto	Spilsbury, E. A., Toronto	Walker, J., Shedden
Ross, H., Clifford	Spohn, P. H., Penetang	Walker, A. H., Toronto
Rosebrugh, J. W., Hamilton	Sprague, W. E., Belleville	Walker, J. R., Ingersoll
Ross, J. F. W., Toronto	Stacey, C. E., Acton	Walden, B., Kincardine
Ross, Jas., “	Staebler, D. M., Berlin	Wallace, J. M., Hamilton
Ross, J., Dundas	Stark, W. G., Hamilton	Walters, W. R., East Toronto
Ross, W. A., Barrie	Stark, T. H., Toronto	Ward, G. C. T., Napanee
Rowland, B. O. W., Maple	Stalker, J., Ridge town	Waters, G., Cobourg
Ruthven, G. D., Wallace's	Stalker, M., Walkerton	Watson, J. A., Toronto
Ruttan, A., Napanee	Stanbury, R., Bayfield	Watt, H., “
Ryall, J., Hamilton	Stewart, J., Montreal	Waugh, W., London
Ryerson, G. S., Toronto	Stevenson, J. M., London	Webb, J. H., Waterloo
Sanderson, G. W., Toronto	Stevenson, R. A., Strathroy	Webster, H. E., York Mills
Saunders, H. J., Kingston	Stewart, A., Palmerston	White, J. E., Toronto
Savage, W. F., Elora	Stewart, W. O., Guelph	Whiteman, R., Shakespear
*Scott, S., Newmarket	Stewart, R. L., Bolton	Whitesides, W. N., Beeton
Scadding, H. C., Toronto	Stowe, E. H., Toronto	Wilson, J. D., London
Scott, S., Newmarket	Strange, F. W., Toronto	Wilson, W. J., Richm'd Hill
Schmidt, G., New Hamburg	Strathy, P. J., “	Wilson, R. J., Toronto
Scholfield, T. C., Toronto	Sturgeon, A. K., Hagersville	Winstanley, O. S., Toronto
Secord, L., Brantford	Stutt, A. E., West Flamboro	Wishart, J., London
Shaw, W. F., Orillia	Stuart, P., Milton	Wishart, D. J. G., Toronto
Shaw, G. M., Hamilton	Stuart, W. T., Toronto	Wood, D. G., Delhi
Shaw, J. E., Chippewa	Sullivan, M., Kingston	Woods, J. M. B., Toronto
Shaw, J. P., Norway	Sutherland, J. E., Paris	Wood, R. J., Streetsville
Sheard, C., Toronto	Sweetnam, L. M., Toronto	Wolverton, A. M., Hamilton
Shore, J. E., Merlin	Taylor, A., Goderich	Workman, J., Toronto
Simpson, T. W., Toronto	Temple, J. A., Toronto	Worthington A., Clinton
Sinclair, A. J., Paris	Tanner, T., Holstein	Wright, A. H., Toronto
Sinclair, A. C., Toronto	Teskey, L., Toronto	*Wright, F. H., “
Sinclair, J., St. Marys	Tegart, E. W., Scotland	Wright, G., “
Sisley, E., Toronto	Thistle, W. B., Toronto	Wright, H. H., “
Sloan, W., Blythe	Thom, J. C., Woodbridge	Yeomans, H. P., Mt. Forest
Smith, G. B., Toronto	Thompson, A. S., W. Tor. Jct.	Youker, W., Belleville
Smith, J. W., Sheffield	Thorburn, J., Toronto	Young, O., Londesboro
Smith, C. M., Orangeville	Thrall, J. H., Woodstock	Young, W. A., Toronto
Smith, R. R., Komoka	Tisdale, W., Lyndock	Zimmerman, R., “
Smith, W. E., St. Thomas	Todd, J. A., Georgetown	* Deceased.
Smith, R. B., Seaforth	Trimble, R. J., Queenston	
Smith, A. D., Parkhill	Tuck, J. A., Bellmore	

NUMBER OF MEMBERS REGISTERED AT ANNUAL MEETINGS.

1881.	Inaugural Meeting, Toronto,	132
1882.	Toronto.....	117
1883.	Toronto.....	147
1884.	Hamilton.....	88
1885.	London.....	127
1886.	Toronto.....	142
1887.	Toronto.....	193
1888.	Toronto.....	185
1889.	Toronto.....	219

CONSTITUTION AND BY-LAWS
OF THE
ONTARIO MEDICAL ASSOCIATION.

CONSTITUTION.

ARTICLE I.

This Association shall be called the Ontario Medical Association, and shall consist of Ordinary, Corresponding, and Honorary Members, Members by Invitation, and Delegates.

SECTION 1.—Ordinary members shall be legally qualified practitioners of Medicine and Surgery, in the Province of Ontario, in good standing.

SECTION 2.—Corresponding members shall be men of eminence in their profession, and actively engaged in the cultivation of medical science.

SECTION 3.—Honorary members shall include:

(a) Members of the Medical Profession who have distinguished themselves in any special department of Medicine.

(b) Members of the Medical Profession who have distinguished themselves in other departments of science.

(c) Members of the Medical Profession whose contributions to scientific literature have met with approbation.

(d) Members of other scientific bodies, whose researches or literary contributions have assisted in advancing the science of Medicine.

Corresponding and Honorary Members shall have the privilege of participating in the discussions, and presenting papers. They shall not be entitled to vote, or be eligible for any office. Their number shall not exceed sixteen.

SECTION 4.—Every application for membership, either as Ordinary, Corresponding, or Honorary Members, must be signed by two members of the Association in good standing, and placed in the hands of the General Secretary. These applications shall be referred to the Committee on Credentials, and the report of this Committee shall decide the question of membership, unless a member of the Association demand a ballot, in which case a three-fourths vote shall be necessary for election.

SECTION 5.—Members by Invitation, shall be such members of the Medical Profession as the President may be pleased to invite to the meeting. They shall be non-residents of the Province, and shall be entitled to participate in the discussions.

SECTION 6.—Delegates shall comprise representatives from all other Provincial Medical Associations in the Dominion of Canada, as well as from City or County Medical Societies in other Provinces, or from State, County, or City Medical Societies in the United States. Delegates shall present their credentials to the Secretary for the inspection of the Committee on Credentials, upon the favorable report of which committee each

delegate shall be introduced by the Chairman to the President. They shall be entitled to seats and participation in the discussions.

ARTICLE II.

OBJECTS.

The objects of this Association shall be :

1. The cultivation of the Science of Medicine and Surgery.
2. The advancement of the character and honor of the Medical Profession
3. The elevation of the standard of Medical Education.
4. The promotion of Public Health.
5. The furtherance of unity and harmony among its members ; and
6. The forming of a connecting link between the various City and County Societies and the Canada Medical Association.

ARTICLE III.

OFFICERS.

SECTION 1.—There shall be a President, four vice-Presidents, a General Secretary, an Assistant Secretary, and a Treasurer. These officers shall be elected and shall enter upon their several duties as laid down in the By-laws, at the close of the meeting at which they have been elected ; hold their offices for the term specified, and until others are appointed in their places. Nominations for any of the above offices are to come before the Association in the report of the Committee on Nominations.

SECTION 2.—The officers of the Association shall be elected annually.

ARTICLE IV.

COMMITTEES—STANDING.

The following Committees shall be elected for the term of three years, and shall consist of six members, two of whom shall retire annually ; the vacancy thus made shall be filled from such list of members as the Committee on Nominations shall recommend in their report. One of the retiring members shall be Chairman, and read the report for that year. They shall perform such duties as are laid down in the By-laws for their guidance, and such other duties as the President may constitutionally direct.

1. Committee on Credentials.
2. " Public Health, Medical and Vital Statistics, and Climatology.
3. " Legislation.
4. " Publication.
5. " By-laws.
6. " Medical Ethics.

ARTICLE V.

COMMITTEES—TEMPORARY.

SECTION 1.—The following Temporary Committees shall be annually appointed by the President, and shall consist of five members each, with power to add to their numbers, and shall perform the duties specified in the By-laws, with such other business as the President may constitutionally direct.

1. Committee on Necrology.
2. " Audit.
3. " Papers and Business.
4. " Arrangements.

SECTION 2.—The Committee on Nominations shall be elected by ballot on the evening of the first day of the Annual Meeting of the Association, and shall contain one member for every fifteen members registered at the time the ballot is taken.

ARTICLE VI.

AMENDMENTS.

All proposals for amendments or additions to Constitution or By-laws must be read and handed to the General Secretary at the Annual Meeting preceding the one at which such amendments or additions shall be voted upon. All such proposals shall be reported upon by the Committee on By-laws, and shall require a three-fourths vote to be adopted.

ARTICLE VII.

SECTIONS.

At every Annual Meeting the business of the Association shall be transacted in sections, unless it is decided otherwise by a three-fourths vote. The division shall be as follows, namely :

1. Medicine, including Therapeutics, Materia Medica, Physiology and Jurisprudence, Medical Diseases of Women, and Diseases of Children.
2. Surgery, including Ophthalmology, Otology and Laryngology, Anatomy, General Pathology and Syphilis, Surgical Diseases of Women.

Each section shall elect a Chairman and a Secretary. The sections shall meet in the afternoons of the first and second day of the Annual Meeting, and also on the morning of the second day.

ARTICLE VIII.

FUNDS.

Funds for the ordinary expenses of the Association shall be raised by the annual payment, by every Ordinary member, of the sum of two dollars, payable to the Treasurer, before registration, at the beginning of the Annual Meeting.

ARTICLE IX.

No member shall be entitled to a vote on any question, or participate in the discussions or transactions of the Association, who has not paid his annual dues.

ARTICLE X.

CODE OF ETHICS.

This Association endorses and shall be guided by the Code of Ethics of the Canada Medical Association.

ARTICLE XI.

This Association reserves the right of punishing any member by reprimand, suspension, or expulsion, for violation of its regulations, or its Code of Ethics. Such expelled member not to be recognized as a regular practitioner in good standing by any member of the Association.

ARTICLE XII.

Any member having been expelled from the Association, and seeking re-admittance, cannot be proposed and ballotted for at the same meeting, and must receive a three-fourths vote of those present entitled to vote, at the meeting next following that of his proposal, to entitle him to membership.

BY-LAWS.

ARTICLE I.

The annual meeting of this Association shall be held on the first Wednesday of the month of June in each and every year, and continue two days, unless otherwise determined by a three-fourths vote at any regular meeting.

Special meetings may be called at any time, upon a requisition, signed by ten members, being presented to the President. The time and place of such special meeting to be determined by the President.

Fifteen members shall constitute a quorum.

ARTICLE II.

PRESIDENT.

A.—The President shall preside over all meetings; enforce a due observance of the Constitution and By-laws; preserve order and decorum; call for Reports, and see that all Committees perform their respective duties; call special meetings on urgent occasions; sign all documents requiring his signature; give the casting vote only; announce the result of the votes; introduce all members other than Ordinary to the meeting; be *ex-officio* a member of all Standing Committees; appoint Representatives of the Association to any meeting of any Medical Society or Association when he thinks the interests of the Association may be enhanced by so doing, and shall, upon opening each regular meeting, deliver an address, setting forth the condition of the Profession in the Province, with such suggestions as he may deem it proper to make, he may, during the meeting give a dissertation on some subject kindred to the objects of the Association, and perform such other duties as by usage appertain to his office. The first duty after installation shall be the appointing of Temporary Committees.

VICE-PRESIDENTS.

B.—The Vice-Presidents shall assist the President in the performance of his duties, and in his absence or at his request, preside over the meeting. They shall preside in the order of seniority of election.

GENERAL SECRETARY.

C.—The Secretary shall give notice of the meetings of the Association to all members ; attend with the records and documents of the Association at all the meetings ; keep a record of the proceedings of each ; take charge of all manuscripts, printed books, and all other property of the Association, except money ; read all papers by “title” or “extract” which the Committee on Papers decide should be read in that manner ; superintend the printing of the Transactions, and their distribution to every member of the Association ; provide a Register for the Committee on Credentials and the Committee on Nominations ; receive reports from all committees and file them with other Transactions ; notify all members of their appointments, either as Officers or Committees ; transact by correspondence any business between this Association and any other body or individual ; attend meetings of all Committees when requested, with records, etc., and transact such other business as may arise in his department ; and bring in an Annual Report of business transactions since last meeting.

ASSISTANT SECRETARY.

D.—The Assistant Secretary shall assist the General Secretary in the performance of his duties ; and shall advise with him as to suitable places for calling meetings ; assist the Committee on Arrangements, and other Committees when requested, in their duties, and transact such other duties as usually apply to local Secretaries.

TREASURER.

E.—The Treasurer shall receive all monies due the Association, and be accountable for the safe-keeping of all funds derived from whatever source, belonging to the Association ; pay all bills or monies directed by vote of the Association ; give a verbal statement of all monies in his care, at any time when requested by the Presiding Officer. He shall make all payments of any kind whatsoever by cheque, and shall, on the last day of the meeting give a detailed report, accompanied by vouchers for all his disbursements ; he shall also pay such orders as may be drawn on him by the Secretary, countersigned by the President, and shall hand over, when called upon by the Association, all monies, papers, books, etc., whatsoever, in his possession, which are claimed as belonging to it, to his successor in office, or any one appointed by the Association to receive them.

ARTICLE III.

DUTIES OF STANDING COMMITTEES.

The Chairman of a Standing Committee for the year is one of the members who retires from the committee that year. He shall read the report for that year ; keep a record of the proceedings of that committee, as well as a copy of report or reports made to the Association, which shall be written on ONE SIDE OF RULED FOOLSCAP PAPER, WITH MARGIN, and handed to the Secretary to be filed with the other Transactions of the Association.

COMMITTEE ON CREDENTIALS.

A.—It shall be the duty of the Committee on Credentials to make due enquiry concerning each applicant for membership, and the authenticity of the Credentials of Delegates, and report on each one favorably or unfavorably, to keep a Register classifying

each individual, and introduce all those on whom they report favorably to the President. The Chairman to make a final report to the President before the close of the meeting of the state of the Register, and other business of his Committee, which shall be filed with the Secretary for the use of the Committee at the next meeting.

COMMITTEE ON NOMINATIONS.

B.—All nominations shall be made in writing and handed to the General Secretary (and addressed to the Committee on Nominations) not later than nine p.m. of the first day of the Annual Meeting of the Association. These nominations are to be referred to the Committee on Nominations, who shall select from the list thus submitted, names for the several offices of the Association. In case there shall be no nomination for a particular vacancy, the Committee shall make the nomination. On the reception of the report the members shall proceed by ballot to fill vacancies in which there is more than one candidate. The President shall restrain the ballot in any case where there is but one candidate for a particular vacancy, and shall declare said candidate duly elected. This Committee shall meet not later than eleven a.m. on the second day of the Annual Meeting, and shall present their report at least two hours before the election of officers.

COMMITTEE OF PUBLIC HEALTH, MEDICAL AND VITAL STATISTICS, AND CLIMATOLOGY.

C.—It shall be the duty of this Committee to place itself in communication with the Provincial Board of Health, and with the various County and City Societies, and, where none exist, with prominent men in the profession, seeking information regarding the above-named subjects; and to present a report embodying anything in regard thereto that will be of interest to the Association or that will be of benefit to the Province.

COMMITTEE ON LEGISLATION.

D.—It shall be the duty of this Committee to watch the course of Legislation, so far as it affects Public Health, or the interests of the Profession of this Province. All proposed legislation offered by any member, shall be referred to this Committee to report thereon. It shall report at each meeting of the Association any new legislation affecting the Profession.

COMMITTEE ON PUBLICATION.

E.—It shall be the duty of this Committee, which shall permanently include the General Secretary and Treasurer, to superintend the publication of all Transactions and supply the Officers with such printed matter or other materials as their offices shall require, or shall be required by the Association. This Committee shall hold the copyright of all papers presented, and of all Transactions, which shall be at their disposal, subject to the instructions of the Association.

COMMITTEE ON BY-LAWS.

F.—It shall be the duty of this Committee to Examine and report on any changes connected with the Constitution or By-laws they may think necessary. All proposed alterations or additions shall be referred to the Committee.

C O M M I T T E E O N M E D I C A L E T H I C S .

G.—To this Committee all questions connected with Ethics shall be referred. They shall investigate all cases referred to them, and shall report the result of their enquiries to the Association ; they shall also report each year any violation of the Code of Ethics by its members, which attracts their attention as affecting the Association.

A R T I C L E I V .

D U T I E S O F T E M P O R A R Y C O M M I T T E E S .

All Temporary Committees shall be annually appointed by the President, the first member appointed shall act as Chairman, and read the report for that year. Their duties shall commence immediately upon their appointment, and terminate at the conclusion of the next meeting.

C O M M I T T E E O N N E C R O L O G Y .

A.—It shall be the duty of this Committee to make a full report upon all deaths which have taken place among the members of this Association during the year, for publication in the Transactions.

A U D I T C O M M I T T E E .

B.—This Committee shall, after the presentation of the report of the Treasurer, examine and compare each item with its corresponding voucher, and submit the result in their report to the Association.

C O M M I T T E E O N P A P E R S A N D B U S I N E S S

D.—It shall be the duty of this Committee to undertake all business not coming within the duties of the other Committees, or referred to them by the President.

To this Committee shall be referred all papers to be read or presented to the meeting ; they shall recommend the manner in which these shall be read, classifying them under the following heads : To be read, 1st, By Extract ; 2nd, *In extenso*.

Those only to be read *in extenso* which are of immediate importance and interest, or sufficiently practical and concise to make their reading advisable.

Those papers which the Committee decide shall be read "by extract," are to be read by the General Secretary, unless the writer names the reader.

They shall prepare a list, classifying the papers by their titles only, which is to be handed to the President, who shall call for the reading of them in the order and manner determined.

C O M M I T T E E O N A R R A N G E M E N T S .

E.—It shall be the duty of this Committee to provide a suitable place for holding the meetings of the Association, to attend to the reception of all members and invited guests, exert themselves with a view to having the members upon the most social footing, and to attend to all matters connected with the proper inception of the meeting.

ARTICLE V.

ANNUAL REPORTS.

The General Secretary and the Treasurer shall each present an annual report of the work to the Association.

All Special Committees, as well as all Standing and Temporary Committees, shall present their reports at the earliest meeting subsequent to their appointment,

ARTICLE VI.

RULES OF ORDER.

The following shall be the order of business at the regular meetings of the Association. The ordinary parliamentary rules shall govern the transaction of business during the meeting. A quorum being present :

1. The President shall take the Chair and call the meeting to order.
2. Reading of minutes of last meeting.
3. Reception of Honorary and Corresponding Members and Delegates.
4. Communications.
5. Report of Committee on Arrangements.
6. Report of Committee on Credentials.
7. Election of Members and admission of the same to seats.
8. President's Address.
9. Report of Committee on Papers and Business.
10. Reading of Papers.
11. Discussion thereon.
12. Reports of Temporary Committees in their order.
13. Reports of Standing Committees not already mentioned.
14. Discussion on Reports.
15. Unfinished and Miscellaneous Business.
16. Resolutions. Notices of Motion.
17. Report of Nomination Committee of Officers and Committees for ensuing year, with place of next meeting.
18. Election of Officers and filling vacancies in Committees.
19. Installation of President for the ensuing year.
20. Nomination by President of Temporary Committees for the following year.
21. Adjournment.

ARTICLE VII.

Any vacancy occurring *ad interim* shall be filled, *ad interim*, by the President.

ARTICLE VIII.

Each Member, upon being admitted, shall sign the Constitution and By-laws.

ARTICLE IX.

Any By-law may be suspended by a three-fourths vote at any regular meeting, for that meeting only.

ARTICLE X.

No person shall be permitted to occupy the time or engage the attention of the meeting but Members, Delegates, and invited Guests, and no member is to occupy the floor in any discussion for a longer period than ten minutes, and no member shall have the privilege of speaking more than once on any question under consideration, except for explanation.

ARTICLE XI.

In case of the absence of the President and Vice-Presidents, the Association shall appoint a President *pro tem.*

ARTICLE XII.

This Association does not require Members to pay the annual fee, except during those years they are present at the meetings, except in the case of Officers and Members of Committees.

Members, in good standing in the Province, will have the privilege of being enrolled on the register upon remitting the annual fee to the Treasurer, when unable to be present at the meeting.

Members, whether present or absent, who are elected officers, or appointed on Committees, must pay the annual fee, unless they decline acting in the position to which they are elected or appointed.



CODE OF MEDICAL ETHICS.

The Code of Ethics sanctioned and adopted by the Ontario Medical Association.

ARTICLE I.

OF THE DUTIES OF PHYSICIANS TO THEIR PATIENTS.

1. A physician should not only be ever ready to obey the calls of the sick, but his mind ought also to be imbued with the greatness of his mission, and the responsibility he habitually incurs in its discharge. These obligations are the more deep and enduring because there is no tribunal other than his own conscience to adjudge penalties for carelessness or neglect. Physicians should, therefore, minister to the sick with due impressions of the importance of their office; reflecting that the ease, the health, and the lives of those committed to their charge depend on their skill, attention, and fidelity. They should study, also, in their deportment, so to unite tenderness with firmness, and condescension with authority, as to inspire the minds of their patients with gratitude, respect, and confidence.

2. Every case committed to the charge of a physician should be treated with attention, steadiness, and humanity. Reasonable indulgence should be granted to the mental imbecility and caprices of the sick. Secrecy and delicacy, when required by peculiar circumstances, should be strictly observed; and the familiar and confidential intercourse to which physicians are admitted in their professional visits should be used with discretion and with the most scrupulous regard to fidelity and honor. The obligation of secrecy extends beyond the period of professional services;—none of the privacies of personal and domestic life, no infirmity of disposition or flaw of character observed during professional attendance, should ever be divulged by the physician except when he is imperatively required to do so. The force and necessity of this obligation are indeed so great that professional men have, under certain circumstances, been protected in their observance of secrecy by courts of justice.

3. Frequent visits to the sick are in general requisite, since they enable the physician to arrive at a more perfect knowledge of the disease—to meet promptly every change which may occur, and also tend to preserve the confidence of the patient. But unnecessary visits are to be avoided, as they give useless anxiety to the patient, tend to diminish the authority of the physician, and render him liable to be suspected of interested motives.

4. A physician should not be forward to make gloomy prognostications because they savor of empiricism, by magnifying the importance of his services in the treatment or cure of the disease. But he should not fail, on proper occasions, to give to the friends of the patient timely notice of danger when it really occurs; and even to the patient himself, if absolutely necessary. This office, however, is so peculiarly alarming when executed by him that it ought to be declined whenever it can be assigned to any other person of sufficient judgment and delicacy. For the physician should be the minister of hope and comfort to the sick; that, by such cordials to the drooping spirit, he may smooth the

bed of death, revive expiring life, and counteract the depressing influence of those maladies which often disturb the tranquility of the most resigned in their last moments. The life of a sick person can be shortened, not only by the acts, but also by the words or the manner of a physician. It is, therefore, a sacred duty to guard himself carefully in this respect, and to avoid all things which have a tendency to discourage the patient and to depress his spirits.

5. A physician ought not to abandon a patient because the case is deemed incurable; for his attendance may continue to be highly useful to the patient and comforting to the relatives around him, even in the last period of a fatal malady, by alleviating pain and other symptoms, and by soothing mental anguish. To decline attendance, under such circumstances, would be sacrificing to fanciful delicacy and mistaken liberality that moral duty which is independent of, and far superior to, all pecuniary consideration.

6. Consultations should be promoted in difficult or protracted cases, as they give rise to confidence, energy, and more enlarged views in practice.

7. The opportunity which a physician not infrequently enjoys of promoting and strengthening the good resolutions of his patients, suffering under the consequences of vicious conduct, ought never to be neglected. His counsels, or even remonstrances, will give satisfaction, not offence, if they be proffered with politeness and evince a genuine love of virtue, accompanied by a sincere interest in the welfare of the person to whom they are addressed.

ARTICLE II.

OF THE DUTIES OF PHYSICIANS TO EACH OTHER, AND TO THE PROFESSION AT LARGE.

SECTION I.—DUTIES FOR THE SUPPORT OF PROFESSIONAL CHARACTER.

1. Every individual on entering the profession, as he becomes thereby entitled to all its privileges and immunities, incurs an obligation to exert his best abilities to maintain its dignity and honor, to exalt its standing, and to extend the bounds of its usefulness. He should, therefore, observe strictly such laws as are instituted for the government of its members;—should avoid all contumelious and sarcastic remarks relative to the faculty as a body; and while, by unwearied diligence, he resorts to every honorable means of enriching the science, he should entertain a due respect for his seniors, who have, by their labors, brought it to the elevated condition in which he finds it.

2. There is no profession from the members of which greater purity of character and a higher standard of moral excellence is required than the medical; and to attain such eminence is a duty every physician owes alike to his profession and to his patients. It is due to the latter, as without it he cannot command their respect and confidence, and to both because no scientific attainments can compensate for the want of correct moral principles. It is also incumbent upon the faculty to be temperate in all things, for the practice of physic requires the unremitting exercise of a clear and vigorous understanding; and on emergencies, for which no professional man should be unprepared, a steady hand, an acute eye, and an unclouded head may be essentials to the well-being, and even to the life, of a fellow-creature.

3. It is derogatory to the dignity of the profession to resort to public advertisements, or private cards, or handbills, inviting the attention of individuals affected with particular diseases, or diseases of special organs, publicly offering advice and medicine to the

poor gratis, or promising radical cures ; or to publish cases and operations in the public prints, or suffer such publications to be made ; to invite laymen to be present as spectators at operations, to boast of cures and remedies, to present certificates of skill and success to the general public, or to perform any other similar act. It is further highly improper for medical men to display their names outside public charities, or public buildings ; also that the posting of bills or circulating of dodgers under any circumstances be prohibited. These are the ordinary practices of empirics, and are highly reprehensible in a regular physician. In case, however, of a physician or surgeon commencing the practice of his profession, or removing to another locality, a simple announcement by an unobtrusive card in the public prints is unobjectionable. Also, that specialists come under the same rules regarding advertising as general practitioners.

4. Equally derogatory to professional character is it for a physician to hold a patent for any surgical instrument or medicine ; or to dispense a secret *NOSTRUM*, whether it be the composition or exclusive property of himself or of others. For if such nostrum be of real efficacy, any concealment regarding it is inconsistent with beneficence and professional liberality ; and if mystery alone give it value and importance, such craft implies either disgraceful ignorance or fraudulent avarice. It is also reprehensible for physicians to give certificates attesting the efficacy of patent or secret or proprietary medicines.

SECTION 2.—PROFESSIONAL SERVICES OF PHYSICIANS TO EACH OTHER.

1. All practitioners of medicine, their wives, and their children while under the paternal care, are entitled to the gratuitous services of any one or more of the faculty residing near them, whose assistance may be desired. A physician afflicted with disease is usually an incompetent judge of his own case ; and the natural anxiety and solicitude which he experiences at the sickness of a wife, a child, or anyone who, by the ties of consanguinity, is rendered peculiarly dear to him, tend to obscure his judgment, and produce timidity and irresolution in his practice. Under such circumstances medical men are peculiarly dependent upon each other, and kind offices and professional aid should always be cheerfully and gratuitously afforded. Visits ought not, however, to be obtruded officially ; as such unasked civility may give rise to embarrassment, or interfere with that choice on which confidence depends. But if a member of the profession, whose circumstances are affluent, request attendance, and an honorarium be offered, it need not be declined ; for no pecuniary obligations ought to be imposed which the party receiving it would not wish to incur.

ARTICLE III.

OF THE DUTIES OF PHYSICIANS AS RESPECTS VICARIOUS OFFICES.

1. When a member of the profession shall officiate for another he shall receive regular fees for such attendance, subject to any arrangement which may exist between them.

ARTICLE IV.

OF THE DUTIES OF PHYSICIANS IN REGARD TO CONSULTATIONS.

1. A regular medical education furnishes the only presumptive evidence of professional abilities and acquirements, and ought to be the only acknowledged right of an individual to the exercise and honors of his profession. Nevertheless, as in consultations the good of the patient is the sole object in view, and this is often dependent on personal confidence, no intelligent regular practitioner who has a license to practise from some

medical board of known and acknowledged respectability, recognized by this Association, and who is in good moral and professional standing in the place in which he resides, should be fastidiously excluded from fellowship, or his aid refused in consultation, when it is requested by the patient. But no one can be considered as a regular practitioner or a fit associate in consultation whose practice is based upon an exclusive dogma, to the rejection of the accumulated experience of the profession, and of the aids actually furnished by anatomy, physiology, pathology, and organic chemistry. No member or members of this Association shall be permitted to meet in consultation or take charge of any case conjointly with anyone who publicly announces himself as an Allopath, a Homœopath, an Eclectic, an Electro-Therapeutist, Physico-Medicalist, or by any such distinctive title which would limit him to a particular line of treatment, to the exclusion of all others.

2. In consultations no rivalry or jealousy should be indulged ; candor, probity, and all due respect, should be exercised towards the physician having charge of the case.

3. In consultations the attending physician should be the first to propose the necessary questions to the sick ; after which the consulting physician should have the opportunity to make such further enquiries of the patient as may be necessary to satisfy him of the true character of the case. Both physicians should then retire to a private place for deliberation ; and the one first in attendance should communicate the directions agreed upon to the patient or his friends, as well as any opinion which it may be thought proper to express. But no statement or discussion of it should take place before the patient or his friends, except in the presence of all the faculty attending, and by their common consent ; and no opinions or prognostications should be delivered which are not the result of previous deliberation and concurrence.

4. In consultations the physician in attendance should deliver his opinion first ; and when there are several consulting, they should deliver their opinions in the order in which they have been called in. No decision, however, should restrain the attending physician from making such variations in the mode of treatment as any subsequent unexpected change in the character of the case may demand. But such variation, and the reason for it, ought to be carefully detailed at the next meeting for consultation. The same privilege also belongs to the consulting physician if he is sent for in an emergency when the regular attendant is out of the way, and similar explanations must be made by him at the next consultation.

5. The utmost punctuality should be observed in the visits of physicians when they are to hold consultation together, and this is generally practicable, for society has been considerate enough to allow the plea of a professional engagement to take precedence of all others, and to be an ample reason for the relinquishment of any present occupation. But as professional engagements may sometimes interfere, and delay one of the parties, the physician who first arrives should wait for his associate a reasonable period, after which the consultation should be considered as postponed to a new appointment. If it be the attending physician who is present, he will of course see the patient and prescribe ; but if it be the consulting one, he should retire, except in case of emergency, or when he has been called from a considerable distance, in which latter case he may examine the patient and give his opinion in writing, and under seal, to be delivered to his associate.

6. All discussions in consultations should be held as secret and confidential. In case one or more of the participants in a consultation cannot agree with the others in reference to any important point, either in the diagnosis of the disease or the future treatment of the

patient, such difference of opinion shall be forthwith communicated by the attending physician to the patient or his responsible friends, in order that they may decide whose opinion and advice they shall accept and act upon.

7. As circumstances sometimes occur to render a special consultation desirable, when the continued attendance of two physicians might be objectionable to the patient, the member of the faculty whose assistance is required in such cases should sedulously guard against all future unsolicited attendance. As such consultations require an extraordinary portion both of time and attention, at least a double honorarium may reasonably be expected.

8. A physician who is called upon to consult should observe the most honorable and scrupulous regard for the character and standing of the practitioner in attendance; the practice of the latter, if necessary, should be justified as far as it can be consistently with a conscientious regard for truth, and no hint or insinuation should be thrown out which could impair the confidence reposed in him, or affect his reputation. The consulting physician should also carefully refrain from any of those extraordinary attentions or assiduities which are too often practised by the dishonest for the base purpose of gaining applause, or ingratiating themselves into the favor of families and individuals.

ARTICLE V.

DUTIES OF PHYSICIANS IN CASES OF INTERFERENCE.

1. A physician, in his intercourse with a patient under the care of another practitioner, should reserve the strictest caution and reserve. No meddling inquiries should be made—no disingenuous hints given relative to the nature and treatment of his disorder; nor any course of conduct pursued that may directly or indirectly tend to diminish the trust reposed in the physician employed.

2. The same circumspection and reserve should be observed when, from motives of business or friendship, a physician is prompted to visit an individual who is under the direction of another practitioner. Indeed, such visits should be avoided, except under peculiar circumstances; and when they are made, no particular inquiries should be instituted relative to the nature of the disease, or the remedies employed, but the topics of conversation should be as foreign to the case as circumstances will admit.

3. A physician ought not to take charge of or prescribe for a patient who has recently been under the care of another member of the faculty in the same illness, except in cases of sudden emergency or in consultation with the physician previously in attendance, or when the latter has relinquished the case, or been regularly notified that his services are no longer desired. Under such circumstances no unjust or illiberal insinuations should be thrown out in relation to the conduct or practice previously pursued, which should be justified as far as candor and regard for truth and probity will permit.

4. When a physician is called to an urgent case, because the family attendant is not at hand, he ought, unless his assistance in consultation be desired, to resign the care of the patient to the latter immediately on his arrival.

5. It often happens in cases of sudden illness, or of recent accidents and injuries, owing to the alarm and anxiety of friends, that a number of physicians are simultaneously sent for. Under these circumstances, courtesy should assign the patient to the first who arrives (unless the patient or some responsible friends express a preference for another), who should select from those present any additional assistance that he may deem necessary. In all such cases, however, the practitioner who officiates should request the

family physician, if there be one, to be called, and, unless his further attendance be requested, should resign the case to the latter on his arrival.

6. When a physician is called to the patient of another practitioner, in consequence of the sickness or absence of the latter, he ought, on the return or recovery of the regular attendant and with the consent of the patient, to surrender the case.

[The expression, "patient of another practitioner," is understood to mean a patient who may have been under the charge of another practitioner at the time of the attack of sickness, or departure from home of the latter, or who may have called for his attendance during his absence or sickness, or in any other manner given it to be understood that he regarded the said physician as his regular medical attendant.]

7. A physician, when visiting a sick person in the country may be desired to see a neighboring patient who is under the regular direction of another physician, in consequence of some sudden change or aggravation of symptoms. The conduct to be pursued on such an occasion is to give advice adapted to present circumstances; to interfere no further than is absolutely necessary with the general plan of treatment; to assume no future directions unless it be expressly desired; and, in that case, to request an immediate consultation with the practitioner previously employed.

8. A physician should not give advice gratis to the well-to-do, either in private or hospital practice, because his doing so is an injury to his professional brethren. The office of a physician can never be supported as an exclusively beneficent one; and it is defrauding, in some degree, the common funds for its support, when fees are dispensed with which might justly be claimed.

9. When a physician who has been engaged to attend a case of midwifery is absent, and another is sent for, if delivery is accomplished during the attendance of the latter, he is entitled to the fee, but should resign the patient to the practitioner first engaged.

ARTICLE VI.

OF DIFFERENCES BETWEEN PHYSICIANS.

1. Diversity of opinion and opposition of interest may, in the medical as in other professions, sometimes occasion controversy and even contention. Whenever such cases unfortunately occur, and cannot be immediately terminated, they should be referred to the arbitration of a sufficient number of physicians or a *court-medical*.

2. A peculiar reserve must be maintained by physicians towards the public, in regard to professional matters, and as there exists numerous points in medical ethics and etiquette through which the feelings of medical men may be painfully assailed in their intercourse with each other, and which cannot be understood or appreciated by general society, neither the subject-matter of such differences nor the adjudication of the arbitrators should be made public, as publicity in a case of this nature may be personally injurious to the individuals concerned, and can hardly fail to bring discredit on the faculty.

ARTICLE VII.

OF PECUNIARY ACKNOWLEDGMENTS.

Some general rules should be adopted by the faculty, in every town or district, relative to *pecuniary acknowledgments* from their patients; and it should be deemed a point of honor to adhere to these rules with as much uniformity as varying circumstances will admit. With regard to club practice, physicians should be remunerated in proportion to the work done at regular tariff rates.

ARTICLE VIII.

OF THE DUTIES OF THE PROFESSION TO THE PUBLIC.

1. As good citizens, it is the duty of physicians to be ever vigilant for the welfare of the community, and to bear their part in sustaining its institutions and burdens; they should also be ever ready to give counsel to the public in relation to matters especially appertaining to their profession, as on subjects of medical police, public hygiene, and legal medicine. It is their province to enlighten the public in regard to quarantine regulations—the location, arrangement, and dietaries of hospitals, asylums, schools, prisons and similar institutions—in relation to the medical police of towns, as drainage, ventilation, etc.—and in regard to measures for the prevention of epidemic and contagious diseases; and when pestilence prevails, it is their duty to face the danger, and to continue their labors for the alleviation of the suffering, even at the jeopardy of their own lives.

2. Medical men should also be always ready, when called on by the legally constituted authorities, to enlighten coroners' inquests and courts of justice, on subjects strictly medical—such as involve questions relating to sanity, legitimacy, murder by poisons or other violent means, and in regard to various other questions embraced in the science of Medical Jurisprudence. But in these cases, and especially where they are required to make a *post-mortem* examination, it is just, in consequence of the time, labor, and skill required, and the responsibility and risk they incur, that the public should award them a proper honorarium.

3. There is no profession by the members of which eleemosynary services are more liberally dispensed than the medical, but justice requires that some limits should be placed to the performance of such good offices. Poverty, professional brotherhood, and certain of the public duties referred to in the first section of this article, should always be recognized as presenting valid claims for gratuitous services; but neither societies for mutual benefit, for the insurance of lives or for analogous purposes, nor any profession or occupation, can be admitted to possess such privilege. Nor can it be justly expected of physicians to furnish certificates of inability to serve on juries, to perform militia duty, or to testify to the state of health of persons wishing to insure their lives, obtain pensions, or the like, without a pecuniary acknowledgment. But to individuals in indigent circumstances such professional services should always be cheerfully and freely accorded.

4. It is the duty of physicians who are frequent witnesses of the enormities committed by quackery, and the injury to health and even destruction of life caused by the use of quack medicines, to enlighten the public on these subjects, to expose the injuries sustained by the unwary from the devices and pretensions of artful empirics and impostors. Physicians ought to use all the influence which they may possess, as professors in colleges of pharmacy, and by exercising their option in regard to the shops to which their prescriptions shall be sent, to discourage druggists and apothecaries from vending quack or secret medicines, or from being in any way engaged in their manufacture and sale.

